

Staple Issue Slip Here

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POSITION	ID NO.	DATE
CLASSIFIER	6	1-25-97
EXAMINER	ER	21 May 97
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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38	✓
39	✓
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43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

SYMBOLS
 ✓ Rejected
 = Allowed
 (Through numeral) Canceled
 N Restricted
 I Non-elected
 A Interference
 O Appeal
 O Objected

Claim	Date
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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99	✓
100	✓

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POSITION	ID NO.	DATE
CLASSIFIER	6	1-25-97
EXAMINER	82	2/1/97
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 08-765244		FILING DATE 10-30-97	
CLAIMS									
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.
10 1									
10 2									
10 3									
10 4									
10 5									
10 6									
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10 50									
TOTAL IND.									
TOTAL DEF.									
TOTAL CLAIMS									

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